SCC eFile	2013 ANNUAL REPORT 213543513 COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION							
1.) CORPORATION NAME:			DUE DATE: 1	1/30/2013				
FOLIOfn, Inc. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: CHERYL WITT 8180 GREENSBORO DRIVE			SCC ID NO: 05298518 5.) STOCK INFORMATION					
8TH FLOOR			CLASS	AUTHORIZED				
MCLEAN, VA			COMA COMB	233,000,000 92,000,000				
3.) CITY OR COUNTY OF VA REG FAIRFAX COUNTY	ISTERED OFFICE:		PREFER	22,000,000				
4.) STATE OR COUNTRY OF INCO VA	DRPORATION:							
6.) PRINCIPAL OFFICE ADDRESS:								
ADDRESS: 8180 GF 8TH FL								
CITY/ST/ZIP: MCLEAN, VA 22102								
7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.								
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	CHERYL WITT VICE PRESIDENT 8180 GREENSBORO DRIVE 8TH FL. MCLEAN, VA 22102	X OFFIC	CER	DIRECTOR				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN WALLMAN CEO/CHAIRMAN 9332 RAMEY LANE GREAT FALLS, VA 22066	X OFFIC	EER	X DIRECTOR				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL HOGAN EVP 8180 GREENSBORO DRIVE 8TH FL. MCLEAN, VA 22102	X OFFIC	EER	DIRECTOR				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	EDWARD M COOK DIRECTOR 14750 LIVE OAK LANE SARATOGA, CA 95070	OFFIC	SER	X DIRECTOR				
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JEFFREY CUSACK DIRECTOR 101 CALIFORNIA STREET SUITE 1600 SAN FRANCISCO, CA 94111	OFFIC	CER	X DIRECTOR				

	NAME:	LALANDEID		OFFICER	Х	DIRECTOR	
	TITLE:	J ALAN REID DIRECTOR					
	ADDRESS:	101 CALIFORNIA ST					
	CITY/ST/ZIP/CO:	STE 1600 SAN FRANCISCO, CA 94111					
				OFFICER	Х	DIRECTOR	
	NAME:	BRUCE SHEWMAKER		•			
	TITLE: ADDRESS:	DIRECTOR MVC CAPITAL					
	CITY/ST/ZIP/CO:	287 BOWMAN AVENUE, THIRD PURCHASE, NY 10577	FLOO	R			
				OFFICER	Х	DIRECTOR	
	NAME:	KATHLEEN WALLMAN		•		•	
	TITLE: ADDRESS:	DIRECTOR					
	CITY/ST/ZIP/CO:	9332 RAMEY LANE GREAT FALLS. VA 22066					
	011 1/01/211 /00.	GREAT FALLS, VA 22000		1	_	1	
	NIANAT			OFFICER	Х	DIRECTOR	
	NAME: TITLE:	Matt Lynch					
	ADDRESS:	DIRECTOR 1735 Tiburon Boulevard					
	CITY/ST/ZIP/CO:	Tiburon, CA 94920					
I AEEIDM TU	AT THE INICODMATION	·	TDON	IIC DEDODT IS ACCI	IDΛ	TE AND	
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.							
/s/ CHERYL	WITT	CHERYL WITT, VICE PRE	SIDEN	IT 9/	18/2	013	
	OF DIRECTOR/OFFICER IN THIS REPORT	PRINTED NAME AND COR TITLE	PORAT	Ē	DAT	E	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.							